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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/594,212	<b>FILING DATE</b> 06/14/2000 <b>RULE</b> -	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2773	<b>ATTORNEY DOCKET NO.</b> US000065
<b>APPLICANTS</b> Martin Freeman, Palo Alto, CA ; Bonghan Cho, Mountain View, CA ; <b>** CONTINUING DATA *****</b> <i>758 CT</i> <i>CTP 09/434,135 11/4/1999</i> <b>** FOREIGN APPLICATIONS *****</b> <i>NONE CT</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/01/2000</b> -				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>CT</i> <i>CT</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 25 <b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> Corporate Patent Counsel U S Philips Corporation 580 White Plains Road Tarrytown ,NY 10591				
<b>TITLE</b> User interface with dynamic menu option organization				
<b>FILING FEE RECEIVED</b> 858	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 8301

<b>SERIAL NUMBER</b> 09/594,212	<b>FILING OR 371(c) DATE</b> 06/14/2000 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2173	<b>ATTORNEY DOCKET NO.</b> US000065
<b>APPLICANTS</b> Martin Freeman, Palo Alto, CA; Bonghan Cho, Mountain View, CA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/434,155 11/04/1999				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/01/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 25
Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 4		
<b>ADDRESS</b> Corporate Patent Counsel U S Philips Corporation 580 White Plains Road Tarrytown ,NY 10591				
<b>TITLE</b> USER INTERFACE WITH DYNAMIC MENU OPTION ORGANIZATION				
<b>FILING FEE RECEIVED</b> 1008	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	